

**State of South Carolina – Department of Insurance
Education Services Division, P.O. Box 100105, Columbia, SC 29202-3105**

**INSTRUCTOR APPLICATION ☐ New ☐ Renewal
PROPERTY AND CASUALTY INSURANCE BROKER PRELICENSING EDUCATION**

SPONSOR INFORMATION (MUST BE COMPLETED BY SPONSOR)

Name of Sponsor: _____

Sponsor's Authorized Representative: _____

Sponsor's Address: _____

Sponsor's Telephone Number: _____

I understand that a sponsor is responsible for the actions of an instructor.

Signature of Sponsor's Authorized Representative

Date

SECTION II (MUST BE COMPLETED BY INSTRUCTOR)

Name of Instructor: _____

Instructor's Address: _____

Instructor's Telephone Number: _____

Date of Birth: _____ Social Security Number _____

Documentation of one of the following must be submitted:

- _____ 1. A minimum of 5 years of current experience as a licensed broker,
_____ 2. Employed for the past 5 years as an underwriter of property and casualty excess and surplus lines insurance, or
_____ 3. Five or more years of teaching a surplus lines broker education course.. Written confirmation of one of the above must be on company letterhead with a notarized signature of a company executive. A resume will not be accepted.

1. Have you ever been the subject of any disciplinary action, including suspension, cancellation, or revocation by any Insurance Department, Governmental entity, or other licensing authority. ☐ Yes ☐ No If yes, attach a statement providing complete details with copy of Order.
2. Have you ever been convicted, pled guilty or no contest in any criminal proceeding? ☐ Yes ☐ No If yes, attach a statement providing complete details with copy of conviction.
3. Have you ever been charged by any entity with misappropriation, conversion or withholding of money? ☐ Yes ☐ No If yes, attach a statement providing complete details.
4. I understand that if I violate South Carolina insurance laws my authority to instruct education courses will be withdrawn.

STATEMENT OF APPLICANT

I _____, do solemnly swear that the information and answers contained in This application is true and complete to the best of my knowledge.

SWORN TO AND BEFORE ME

_____ Day Of _____

Notary Public